

12/13/01
J1048 U.S. PTO

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Approved for use through 10/31/2002. OMB 0651-0032
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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	
First Inventor	Winston Z. Ho
Title	Chemiluminescence-based Microfluidic Biochip
Express Mail Label No	ET64138221245

APPLICATION ELEMENTS
See MPEP chapter 600 concerning utility patent application contents.

ADDRESS TO: Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) (Submit an original and a duplicate for fee processing)	
2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	
3. <input checked="" type="checkbox"/> Specification [Total Pages 13] (preferred arrangement set forth below) - Descriptive title of the invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R & D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure	
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets 3]	
5. Oath or Declaration [Total Pages 2] a. <input checked="" type="checkbox"/> Newly executed (original or copy) Copy from a prior application (37 CFR 1.63 (d)) b. <input type="checkbox"/> (for continuation/divisional with Box 18 completed) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	

7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. <input type="checkbox"/> Computer Readable Form (CRF) b. Specification Sequence Listing on: i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or ii. <input type="checkbox"/> paper c. <input type="checkbox"/> Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS	
9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))	
10. <input type="checkbox"/> 37 CFR 3.73(b) Statement (when there is an assignee) <input type="checkbox"/> Power of Attorney	
11. <input type="checkbox"/> English Translation Document (if applicable)	
12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations	
13. <input type="checkbox"/> Preliminary Amendment	
14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)	
16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.	
17. <input type="checkbox"/> Other:	

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

<input type="checkbox"/> Continuation	<input type="checkbox"/> Divisional	<input type="checkbox"/> Continuation-in-part (CIP)	of prior application No.: _____ / _____
Prior application information: Examiner _____		Group Art Unit: _____	

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)	or	<input type="checkbox"/> Correspondence address below
--	---	----	---

Name	Winston Z. Ho				
Address	14541 Langhill Drive				
City	Hacienda Heights	State	CA	Zip Code	91745
Country	USA	Telephone	626-336-1363	Fax	626-333-5163

Name (Print/Type)	Winston Z. Ho	Registration No. (Attorney/Agent)	
Signature	<i>Winston Z. Ho</i>	Date	12/12/01

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Complete if Known

Application Number

Filing Date

First Named Inventor

Winston Z. Ho

Examiner Name

Group Art Unit

Attorney Docket No.

TOTAL AMOUNT OF PAYMENT

(\$) 370.00

METHOD OF PAYMENT

1. ☐ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit
Account
NumberDeposit
Account
Name
☐ Charge Any Additional Fee Required
Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status.
See 37 CFR 1.27

2. ☒ Payment Enclosed:

☒ Check☐ Credit card☐ Money
Order☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$)

101 710 201 355 Utility filing fee

106 320 206 160 Design filing fee

107 490 207 245 Plant filing fee

108 710 208 355 Reissue filing fee

114 150 214 75 Provisional filing fee

Fee Paid

370.00

SUBTOTAL (1) (\$) 370.00

2. EXTRA CLAIM FEES

Total Claims -20** = X =

Independent Claims -3** = X =

Multiple Dependent =

Large Entity Small Entity

Fee Fee Fee Fee Fee Description

Code (\$) Code (\$) Code (\$)

103 18 203 9 Claims in excess of 20

102 80 202 40 Independent claims in excess of 3

104 270 204 135 Multiple dependent claim, if not paid

109 80 209 40 ** Reissue independent claims

over original patent

110 18 210 9 ** Reissue claims in excess of 20

and over original patent

SUBTOTAL (2)

(\$)

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large
EntitySmall
EntityFee Fee Fee Fee
Code (\$) Code (\$)

Fee Description

Fee Paid

105 130 205 65

Surcharge - late filing fee or oath

127 50 227 25

Surcharge - late provisional filing fee or cover sheet

139 130 139 130

Non-English specification

147 2,520 147 2,520

For filing a request for ex parte reexamination

112 920* 112 920*

Requesting publication of SIR prior to Examiner action

113 1,840* 113 1,840*

Requesting publication of SIR after Examiner action

115 110 215 55

Extension for reply within first month

116 390 216 195

Extension for reply within second month

117 890 217 445

Extension for reply within third month

118 1,390 218 695

Extension for reply within fourth month

128 1,890 228 945

Extension for reply within fifth month

119 310 219 155

Notice of Appeal

120 310 220 155

Filing a brief in support of an appeal

121 270 221 135

Request for oral hearing

138 1,510 138 1,510

Petition to institute a public use proceeding

140 110 240 55

Petition to revive - unavoidable

141 1,240 241 620

Petition to revive - unintentional

142 1,240 242 620

Utility issue fee (or reissue)

143 440 243 220

Design issue fee

144 600 244 300

Plant issue fee

122 130 122 130

Petitions to the Commissioner

123 50 123 50

Processing fee under 37 CFR 1.17(q)

126 180 126 180

Submission of Information Disclosure Stmt

581 40 581 40

Recording each patent assignment per property (times number of properties)

146 710 246 355

Filing a submission after final rejection (37 CFR § 1.129(a))

149 710 249 355

For each additional invention to be examined (37 CFR § 1.129(b))

179 710 279 355

Request for Continued Examination (RCE)

169 900 169 900

Request for expedited examination of a design application

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

SUBMITTED BY

Name (Print/Type)

Winston Z. Ho

Registration No.

(Attorney/Agent)

Complete (if applicable)

Telephone

626-336-1363

Date

12/12/01

Signature

39340

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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PATENT APPLICATION SERIAL NO. _____

U.S. DEPARTMENT OF COMMERCE
PATENT AND TRADEMARK OFFICE
FEE RECORD SHEET

12/21/2001 STEUMEL1 00000003 10022007

01 FC:201

370.00 DP

PTO-1556

(5/87)

*U.S. GPO: 2000-468-987/39595